

# Wisconsin Medicaid and BadgerCare update

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Wisconsin Medicaid and BadgerCare Information for Providers

To:

Presumptive  
Eligibility for  
Family Planning  
Waiver Program  
Providers

Presumptive  
Eligibility for  
Pregnant  
Women Benefit  
Providers

HMOs and Other  
Managed Care  
Programs

## Income Limits for the Presumptive Eligibility for Pregnant Women Benefit and the Family Planning Waiver Program

This *Wisconsin Medicaid and BadgerCare Update* contains the income limits effective immediately for the Presumptive Eligibility (PE) for Pregnant Women Benefit and the Family Planning Waiver Program (FPWP).

The Attachment of this *Update* lists the current income limits based on the Federal Poverty Level (FPL) income limits, which change annually.

### Presumptive Eligibility for Pregnant Women Benefit

To determine eligibility for the PE for Pregnant Women Benefit, providers should use the income limits in the Attachment in conjunction with the instructions in the Guide to Determining Presumptive Eligibility for Pregnant Women. To access the guide, providers may refer to the Medicaid Web site at [dhfs.wisconsin.gov/medicaid/](http://dhfs.wisconsin.gov/medicaid/). Providers may request a paper copy by calling Provider Services at (800) 947-9627 or (608) 221-9883.

### Family Planning Waiver Program

To determine eligibility for the FPWP, providers should use the income limits in Table II of the Attachment for 185 percent of the FPL.

### Information Regarding Medicaid HMOs

This *Update* contains Medicaid fee-for-service policy and applies to providers of services to recipients on fee-for-service Medicaid only. For Medicaid HMO or managed care policy, contact the appropriate managed care organization. Wisconsin Medicaid HMOs are required to provide at least the same benefits as those provided under fee-for-service arrangements.

The *Wisconsin Medicaid and BadgerCare Update* is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our Web site at [dhfs.wisconsin.gov/medicaid/](http://dhfs.wisconsin.gov/medicaid/).

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# ATTACHMENT

## Income Limits for the Presumptive Eligibility for Pregnant Women Benefit and the Family Planning Waiver Program

The following income limits are effective on and after February 1, 2006.

Table I — 133 Percent of FPL*		Table II — 185 Percent of FPL	
Income Limits		Income Limits	
Monthly Income		Monthly Income	
Family Size	Standard	Family Size	Standard
1	\$1,086.17	1	\$1,510.83
2	\$1,463.00	2	\$2,035.00
3	\$1,839.83	3	\$2,559.17
4	\$2,216.67	4	\$3,083.33
5	\$2,593.50	5	\$3,607.50
6	\$2,970.33	6	\$4,131.67
7	\$3,347.17	7	\$4,655.83
8	\$3,724.00	8	\$5,180.00
9	\$4,100.83	9	\$5,704.17
10	\$4,477.67	10	\$6,228.33
If a household exceeds 10, add \$376.83 per month for each additional member.		If a household exceeds 10, add \$524.17 per month for each additional member.	

\*FPL — Federal Poverty Level.